



TOWN OF BROOKFIELD RESIDENTIAL APPLICATION PRELIMINARY ZONING REQUEST

Activity #: _____ PROPERTY I.D. # : _____
 Application Date: _____

APPLICANT/AGENT: **LANDOWNER OF RECORD:**

Name: _____ Name: _____
 Address: _____ Address: _____
 Zip _____ Zip _____

Contact Name: _____ Contact Name: _____
 Phone #: _____ Phone #: _____

PROJECT DESCRIPTION: _____

SITE DATA:

Street Address: _____ Zone: _____ Has a variance been granted on this property? Yes [] No []

Subdivision Name: _____ Conservation Subdivision: Yes [] No []

Historic District: Yes [] No []

Acres: _____ Lot Size: (Multiply acres by 43,560 sq. ft) = Square Feet: 0

COVERAGE:

Item	Square Feet
House	_____
Deck	_____
Porch	_____
Garage	_____
Shed	_____
Pool	_____
Other	_____
New Construction	_____

Total Square Footage:

INSTRUCTIONS

Enter actual FIRST FLOOR square footage ONLY from Site Plan drawings or Tax Assessor's Field Card.

If there is no change in foot print, note this in the space below and proceed to Proposed Setbacks.

Total all of the above square footages.

PERCENT LOT COVERAGE: #DIV/0! *Divide Total Square Footage by Lot Size in square feet . Multiply the result by 100 to calculate Percent of Lot Coverage.*

BUILDING HEIGHT: *Enter Building Height: Distance from the front finished grade to a point midway between the highest point of the roof and an uninhabited attic floor.*

PROPOSED SETBACKS: *5. Enter setbacks from site plan below. 6. Indicate setbacks on site plan.*

	Center of Road	Rear Yard	Right Side Yard	Left Side Yard

I represent that this information is current, accurate and complete and that all the work has been completed in accordance with ordinances, regulations, building and health codes. I agree that any information that is determined to be false, or misleading will be subject to fines and penalties set by regulation, code or statute.

I certify that I am the designated agent for this project OR

Signature: _____ Signature: _____

Applicant *Property Owner*